

UNITED STATES INTERNATIONAL TRADE COMMISSION

SUMMARY VOTING SHEET FOR RESPONSE ADEQUACY AND EXPEDITED OR FULL FIVE-YEAR REVIEW

Subject	Reference Information
Malleable cast iron pipe fittings from Korea: Investigation No. 731-TA-279 (Review)	Control No. INV-99-526

Individual Responses (A = Adequate, I = Inadequate)	Bragg	Miller	Crawford	Hillman	Koplan	Askey	Commis- sion
Domestic (U.S. Producers)							
Grinnell Corp.	<input type="checkbox"/> A	<input type="checkbox"/> A	<input type="checkbox"/> A	<input type="checkbox"/> A	<input type="checkbox"/> A	<input type="checkbox"/> A	<input type="checkbox"/> A
Ward Manufacturing, Inc.	<input type="checkbox"/> A	<input type="checkbox"/> A	<input type="checkbox"/> A	<input type="checkbox"/> A	<input type="checkbox"/> A	<input type="checkbox"/> A	<input type="checkbox"/> A
Cast Iron Pipe Fittings Committee	<input type="checkbox"/> A	<input type="checkbox"/> A	<input type="checkbox"/> A	<input type="checkbox"/> A	<input type="checkbox"/> A	<input type="checkbox"/> A	<input type="checkbox"/> A
Group Responses (A = Adequate, I = Inadequate)							
DOMESTIC	<input type="checkbox"/> A	<input type="checkbox"/> A	<input type="checkbox"/> A	<input type="checkbox"/> A	<input type="checkbox"/> A	<input type="checkbox"/> A	<input type="checkbox"/> A
RESPONDENT	<input type="checkbox"/> I	<input type="checkbox"/> I	<input type="checkbox"/> I	<input type="checkbox"/> I	<input type="checkbox"/> I	<input type="checkbox"/> I	<input type="checkbox"/> I
Expedited or Full Review							
EXPEDITED: DOMESTIC GROUP INADEQUATE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
EXPEDITED: RESPONDENT.. GROUP INADEQUATE	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/> X	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
FULL	<input checked="" type="checkbox"/> X	<input checked="" type="checkbox"/> X	<input type="checkbox"/>	<input checked="" type="checkbox"/> X	<input checked="" type="checkbox"/> X	<input checked="" type="checkbox"/> X	<input checked="" type="checkbox"/> X

SECRETARY'S CERTIFICATION OF COMMISSION ACTION	
<div style="font-family: cursive; font-size: 1.2em; margin-bottom: 5px;"> <u>Deanna R. Keehnke</u> </div> <div style="text-align: center;">Secretary</div>	<div style="text-align: right;">Date</div> <div style="font-size: 1.2em; margin-top: 5px;">4/8/99</div>